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Approved for use through 09/30/2000 OMB 05-100-0001
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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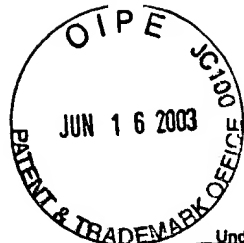
TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Applicant Number	09/547,501	
	Filing Date	April 12, 2000	
	First Named Inventor	Christian	
	Group Art Unit	1617	
	Examiner Name	S.A. Jiang	
Total Number of Pages in This Submission	67	Attorney Docket Number	IMI-002

ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):		
<table border="1"><tr><td>Remarks</td><td>As a courtesy to the Examiner, transmitted hereby find true copies of the Information Disclosure Statements submitted Nov. 10, 2000 and July 23, 2001. No Fee is Required.</td></tr></table>			Remarks	As a courtesy to the Examiner, transmitted hereby find true copies of the Information Disclosure Statements submitted Nov. 10, 2000 and July 23, 2001. No Fee is Required.
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John S. Sundsmo, 34,446 BioMedPatent.com
Signature	
Date	June 12, 2003

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Typed or printed name	John S. Sundsmo		
Signature		Date	June 12, 2003

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PTO/SB/17 (09-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)55.00

Complete if Known

Application Number 09/547,501

Filing Date April 12, 2000

First Named Inventor Christian

Examiner Name 1617

Group Art Unit S.A. Jiang

Attorney Docket No. IMI-002

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METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 50-1159

Deposit Account Name BioMedPatent.com

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Fee Fee Fee Fee Description
Code (\$) Code (\$) Code (\$)

101 710 201 355 Utility filing fee

106 320 206 160 Design filing fee

107 490 207 245 Plant filing fee

108 710 208 355 Reissue filing fee

114 150 214 75 Provisional filing fee

Fee Paid

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims Extra Claims Fee from below Fee Paid
Independent Claims -20** = X =
Multiple Dependent Claims -3** = X =

Large Entity Small Entity

Fee Fee Fee Fee Fee Description
Code (\$) Code (\$) Code (\$)

103 18 203 9 Claims in excess of 20

102 80 202 40 Independent claims in excess of 3

104 270 204 135 Multiple dependent claim, if not paid

109 80 209 40 ** Reissue independent claims over original patent

110 18 210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Fee Fee Fee Fee Description
Code (\$) Code (\$) Code (\$)

105 130 205 65 Surcharge - late filing fee or oath

127 50 227 25 Surcharge - late provisional filing fee or cover sheet

139 130 139 130 Non-English specification

147 2,520 147 2,520 For filing a request for ex parte reexamination

112 920* 112 920* Requesting publication of SIR prior to Examiner action

113 1,840* 113 1,840* Requesting publication of SIR after Examiner action

115 110 215 55 Extension for reply within first month

116 390 216 195 Extension for reply within second month

117 890 217 445 Extension for reply within third month

118 1,390 218 695 Extension for reply within fourth month

128 1,890 228 945 Extension for reply within fifth month

119 310 219 155 Notice of Appeal

120 310 220 155 Filing a brief in support of an appeal

121 270 221 135 Request for oral hearing

138 1,510 138 1,510 Petition to institute a public use proceeding

140 110 240 55 Petition to revive - unavoidable

141 1,240 241 620 Petition to revive - unintentional

142 1,240 242 620 Utility issue fee (or reissue)

143 440 243 220 Design issue fee

144 600 244 300 Plant issue fee

122 130 122 130 Petitions to the Commissioner

123 50 123 50 Petitions related to provisional applications

126 240 126 240 Submission of Information Disclosure Stmt

581 40 581 40 Recording each patent assignment per property (times number of properties)

146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(e))

149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))

179 710 279 355 Request for Continued Examination (RCE)

169 900 169 900 Request for expedited examination of a design application

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)55.00

SUBMITTED BY

Name (Print/Type)	John S. Sundsmo	Registration No. (Attorney/Agent)	34,446	Complete (if applicable)	
Signature		Telephone	760-806-3385	Date	July 23, 2001

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PTO/SB/21 (6-98)
Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/547,501	
	Filing Date	April 12, 2000	
	First Named Inventor	Christian	
	Group Art Unit	1617	
	Examiner Name	S. Jiang	
Total Number of Pages in This Submission	12	Attorney Docket Number	IMI-002

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<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
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<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John S. Sundsmo, 34,446 BioMedPatent.com
Signature	
Date	July 23, 2001

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Signature		Date	July 23, 2001

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PTO/SB/21 (8-98)
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/547,501	
	Filing Date	April 12, 2000	
	First Named Inventor	Christian, S.T.	
	Group Art Unit	1614	
	Examiner Name		
Total Number of Pages in This Submission	54	Attorney Docket Number	IMI-002

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<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	Submitted prior to first action on merits: -Form SB08A; -Brief Statement of Relevance; and -Medline Summary/Abstract Information
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	BioMedPatent.com John S. Sundsmo, 34,446
Signature	
Date	November 10, 2000

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Signature		Date	11/10/2000

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